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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

*Clif*    *NONE*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*Clif*    *NONE*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Clif</i>	Examiner's Signature	Initials	DRAWING 3	CLAIMS 49	CLAIMS 3

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## TITLE

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